Case 20-11869 Doc 13 Filed 02/26/20 Page 1 of 24

Fill	in this information to	identify your	case:				
		A. Dunn					
	First Nar		Middle Name	Last Name			
	tor 2 use if, filing) First Nar	ne	Middle Name	Last Name			
Unit	ed States Bankruptcy (Court for the:	DISTRICT OF MARY	'LAND-GREENBELT DIVISION			
Cas	e number 20-1186 9	\					
(if kn		<u> </u>				_	c if this is an
						amen	ded filing
○ (1	::-!- - 40	00					
	icial Form 10		and Liabilities	and Cartain Statistical In	formation		40/45
	•			and Certain Statistical Ir			12/15 ng correct
infor	mation. Fill out all of	your schedul	es first; then complete	e the information on this form. If you eck the box at the top of this page.			
Pari			new Gummary and on	con the box at the top of this page.			
ı alı	Julillianze roc	II ASSELS				V	
						Your a	ssets of what you own
1.	Schedule A/B: Prope	erty (Official Fo	orm 106A/B)			•	101 255 50
						\$	191,355.50
	1b. Copy line 62, Tota	Il personal pro	perty, from Schedule A	/B		\$	51,310.00
	1c. Copy line 63, Tota	l of all propert	y on Schedule A/B			\$	242,665.50
Part	2: Summarize You	r Liabilities					
						Your li	abilities
						Amoun	t you owe
2.				erty (Official Form 106D) at the bottom of the last page of Part 1	of Schedule D	\$	241,514.00
3.			Unsecured Claims (Offi 1 (priority unsecured cla	cial Form 106E/F) aims) from line 6e of <i>Schedule E/F</i>		\$	0.00
	3b. Copy the total cla	ims from Part	2 (nonpriority unsecure	d claims) from line 6j of Schedule E/F		\$	1,445.00
				You	ur total liabilities	\$	242,959.00
Part							
4.	Schedule I: Your Inco			lule I		\$	5,947.63
5.	Schedule J: Your Exp Copy your monthly ex					\$	4,685.00
Part	4: Answer These	Questions for	Administrative and S	tatistical Records			
6.	,		er Chapters 7, 11, or 1 on this part of the form	3? Check this box and submit this form to	o the court with you	ır other scl	nedules.
7.	■ Yes What kind of debt do	you have?					
				er debts are those "incurred by an indiv 8-9g for statistical purposes. 28 U.S.C.		a personal	, family, or
		not primarily	consumer debts. You	have nothing to report on this part of th		box and s	ubmit this form to

Official Form 106Sum Summar

Debtor 1 Harry A. Dunn Case number (if known) 20-11869

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

7,244.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

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Fill in t	his information	to identify	your case and th	nis filing	g:			
Debtor		rry A. Dui						
	First	Name		Name	Last Name			
Debtor (Spouse,		Name	Middle	Name	Last Name			
United	States Bankrupto	cy Court for	the: DISTRICT	OF MA	RYLAND-GREENBELT DIVISION			
Case n	umber 20-118	369						Check if this is an
								amended filing
O#: ∘	ial Farms (106 A /E	•					
	ial Form ´ edule A		-					40/45
				an acces	t only once. If an asset fits in more than on	a actorony list the a	aget in the	12/15
Part 1:	every question. Describe Each R	esidence, B	uilding, Land, or Ot	her Rea	his form. On the top of any additional page I Estate You Own or Have an Interest In Jence, building, land, or similar property?	o,o your name u		
Ye	s. Where is the pro	operty?						
Str	B12 Kingswell eet address, if availab		20902-0000 ZIP Code		Land Investment property Timeshare Other	the amount of any Creditors Who Hard Current value of the entire property? \$382,711 Describe the natu	he Constant of the constant of	or exemptions. Put ims on Schedule D: Secured by Property. surrent value of the ortion you own? \$191,355.50 ownership interest by by the entireties, or
				Who	has an interest in the property? Check one Debtor 1 only	Joint Tenants		
	ontgomery				20010. 2 0)			
Co	unty					Check if this		nity property
					r information you wish to add about this ite	•	,	
					erty identification number: imated arrears: \$44,000			
					your entries from Part 1, including an er here			\$191,355.50
Part 2:	Describe Your Ve	ehicles						
					nny vehicles, whether they are register Schedule G: Executory Contracts and Ur		any vehic	les you own that
3. Cars	, vans, trucks, t	ractors, sp	ort utility vehicle	s, moto	prcycles			
■ No)							
☐ Ye	es							

Debtor 1	Harry A. Dur	Case number (if kno	wn) 20-11869
		or homes, ATVs and other recreational vehicles, other vehicles, and accessories motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories	
■ No			
☐ Yes			
		the portion you own for all of your entries from Part 2, including any entries for ed for Part 2. Write that number here=>	\$0.00
Part 3: D	escribe Your Perso	nal and Household Items	
Do you o	wn or have any le	egal or equitable interest in any of the following items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
	hold goods and f ooles: Maior applian	urnishings ces, furniture, linens, china, kitchenware	
□ No	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		
Yes	. Describe		
		Bedroom set, coffee tables, dresser, dining room set, sofas, desk,, chairs, kitchen items, etc.	\$1,300.00
□ No	oles: Televisions ar including cell	nd radios; audio, video, stereo, and digital equipment; computers, printers, scanners; mus phones, cameras, media players, games	ic collections; electronic devices
■ Yes	. Describe		
		TVs, cellphones, game console, tablet, printer, etc.	\$1,200.00
Exam _l ■ No	other collection	figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, cons, memorabilia, collectibles	oin, or baseball card collections;
∐ Yes	. Describe		
Exam _l	ment for sports ar ples: Sports, photo musical instru	graphic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canc	es and kayaks; carpentry tools;
■ No □ Yes	. Describe		
10. Firea ı <i>Exan</i> □ No		s, shotguns, ammunition, and related equipment	
	. Describe		
		Ch sterm wife	\$700.00
		Shotgun, rifle	\$700.00
□ No		othes, furs, leather coats, designer wear, shoes, accessories	
		Personal clothing: shirts, pants, shoes, coats, jackets, sweaters,	
		underwear, sleepwear, shorts, etc	\$2,000.00

Debtor 1	Harry A. Dunr	1			Case number (if known)	20-11869
☐ No		elry, cos	stume jewelry, enga	agement rings, wedding rings, heirloom je	ewelry, watches, gems, ç	old, silver
		Watch	, chain			\$300.00
Exan □ No	farm animals nples: Dogs, cats, bi	rds, hor	ses			
		Dog				Unknown
■ No □ Yes	s. Give specific infor	mation.	 vour entries from	I not already list, including any health Part 3, including any entries for pages	·	\$5,500.00
	Describe Your Financi Dwn or have any leເ			n any of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
☐ No		-		ome, in a safe deposit box, and on hand	when you file your petition	on
					Cash	\$30.00
Exam				counts; certificates of deposit; shares in cas with the same institution, list each. Institution name:	redit unions, brokerage ł	nouses, and other similar
		17.1.	Checking	Bank of America		\$700.00
		17.2.	Checking	Bank of America		\$20.00
		17.3.	Savings	Bank of America		\$40.00
		17.4.	Savings	Andrews FCU		\$20.00
	ls, mutual funds, o <i>nples:</i> Bond funds, ir			rokerage firms, money market accounts		
	S		Institution or issue	r name:		

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De	ebtor 1	Harry A. Dunn			Case number (if known)	20-11869
19.	joint	ublicly traded stoo venture	ck and interests in inco	rporated and unincorporated business	es, including an interest	in an LLC, partnership, and
	■ No	O: ::::::				
	⊔ Yes.	Give specific infor	mation about them Name of entity:		% of ownership:	
20.	Nego Non-r	<i>tiable instrument</i> s in	clude personal checks, c	gotiable and non-negotiable instrumer cashiers' checks, promissory notes, and n transfer to someone by signing or deliver	noney orders.	
	■ No					
	⊔ Yes.	Give specific inform	nation about them Issuer name:			
21.		ment or pension a ples: Interests in IR.		, 403(b), thrift savings accounts, or other	pension or profit-sharing p	olans
		List each account s	separately. Type of account:	Institution name:		
			Thrift Saving	Federal		\$45,000.00
22.	Your s Exam		deposits you have made	so that you may continue service or use the public utilities (electric, gas, water), tele		es, or others
	■ No □ Yes.			Institution name or individual:		
23.	Annui	ties (A contract for	a periodic payment of mo	oney to you, either for life or for a number	of years)	
		Issu	er name and description.			
	26 U.S. ■ No	.C. §§ 530(b)(1), 52	9A(b), and 529(b)(1).	qualified ABLE program, or under a q		gram.
	☐ Yes.		·	ion. Separately file the records of any inte	5 (,	
	■ No	•		(other than anything listed in line 1), a	nd rights or powers exer	cisable for your benefit
			mation about them			
26.				and other intellectual property eeds from royalties and licensing agreem	ents	
	☐ Yes.	Give specific infor	mation about them			
27.	Exam ■ No	ples: Building permi		bles operative association holdings, liquor lice	enses, professional license	es
	☐ Yes.	Give specific infor	mation about them			
M	oney or	property owed to	you?			Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	Tax re ■ No	funds owed to you	J			
	_	Give specific inform	nation about them, includ	ling whether you already filed the returns	and the tax years	
29.		/ support ples: Past due or lu	mp sum alimony, spousa	l support, child support, maintenance, div	vorce settlement, property	settlement
Off		Give specific inform	nation	Schedule A/B: Property		page 4

Debtor 1	Harry A. Dunn	Case number (if known)	20-11869
Exan	r amounts someone owes you nples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vac benefits; unpaid loans you made to someone else	ation pay, workers' comper	nsation, Social Security
■ No □ Yes	s. Give specific information		
	ests in insurance policies nples: Health, disability, or life insurance; health savings account (HSA); credit, home	eowner's, or renter's insurar	nce
No			
☐ Yes	s. Name the insurance company of each policy and list its value. Company name: Bener	ficiary:	Surrender or refund value:
If you	nterest in property that is due you from someone who has died are the beneficiary of a living trust, expect proceeds from a life insurance policy, or eone has died.	are currently entitled to rece	eive property because
☐ Yes	s. Give specific information		
	as against third parties, whether or not you have filed a lawsuit or made a demanples: Accidents, employment disputes, insurance claims, or rights to sue	and for payment	
☐ Yes	s. Describe each claim		
■ No	contingent and unliquidated claims of every nature, including counterclaims of	of the debtor and rights to	set off claims
	s. Describe each claim		
_	inancial assets you did not already list		
■ No □ Yes	s. Give specific information		
	the dollar value of all of your entries from Part 4, including any entries for pag Part 4. Write that number here		\$45,810.00
Part 5: D	escribe Any Business-Related Property You Own or Have an Interest In. List any real esta	ate in Part 1.	
_	own or have any legal or equitable interest in any business-related property?		
_	Go to Part 6. Go to line 38.		
	escribe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interes you own or have an interest in farmland, list it in Part 1.	st In.	
	ou own or have any legal or equitable interest in any farm- or commercial fishin	g-related property?	
	o. Go to Part 7.		
∐ Ye	es. Go to line 47.		
Part 7:	Describe All Property You Own or Have an Interest in That You Did Not List Above		
	ou have other property of any kind you did not already list? nples: Season tickets, country club membership		
■ No	s. Give specific information		
		ſ	
54. Add	the dollar value of all of your entries from Part 7. Write that number here		\$0.00

Official Form 106A/B Schedule A/B: Property page 5

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Debto	or 1 Harry A. Dunn		Case number (if known)	20-11869	
Part 8	List the Totals of Each Part of this Form				
55.	Part 1: Total real estate, line 2				\$191,355.50
56.	Part 2: Total vehicles, line 5	\$0.00			
57.	Part 3: Total personal and household items, line 15	\$5,500.00			
58.	Part 4: Total financial assets, line 36	\$45,810.00			
59.	Part 5: Total business-related property, line 45	\$0.00			
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00			
61.	Part 7: Total other property not listed, line 54	+\$0.00			
62.	Total personal property. Add lines 56 through 61	\$51,310.00	Copy personal property to	otal	\$51,310.00
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$	242,665.50

Fill in this info	rmation to identify your	case:			
Debtor 1	Harry A. Dunn First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name ND-GREENBELT DIVISION		
	Bankruptcy Court for the:	DISTRICT OF MARTLA	IND-GREENBELT DIVISION		
Case number (if known)	20-11869			☐ Check if this is a	ın
				amended filing	

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on	Current value of the	Amo	ount of the exemption you claim	Specific laws that allow exemption
Schedule A/B that lists this property	portion you own Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
2812 Kingswell Dr. Silver Spring, MD 20902 Montgomery County	\$191,355.50		\$5,690.00	Md. Code Ann., Cts. & Jud Proc. § 11-504(b)(5)
Estimated arrears: \$44,000 Line from <i>Schedule A/B</i> : 1.1			100% of fair market value, up to any applicable statutory limit	1100. 3 11-30-(0)(0)
Bedroom set, coffee tables, dresser, dining room set, sofas, desk., chairs,	\$1,300.00		\$1,000.00	Md. Code Ann., Cts. & Jud Proc. § 11-504(b)(4)
kitchen items, etc. Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	1100. 3 11 304(5)(4)
Bedroom set, coffee tables, dresser, dining room set, sofas, desk,, chairs,	\$1,300.00		\$300.00	Md. Code Ann., Cts. & Jud Proc. § 11-504(f)(1)(i)(1)
kitchen items, etc. Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	
TVs, cellphones, game console, tablet, printer, etc.	\$1,200.00	•	\$1,200.00	Md. Code Ann., Cts. & Jud Proc. § 11-504(f)(1)(i)(1)
Line from Schedule A/B: 7.1			100% of fair market value, up to any applicable statutory limit	
Shotgun, rifle Line from Schedule A/B: 10.1	\$700.00		\$700.00	Md. Code Ann., Cts. & Jud Proc. § 11-504(f)(1)(i)(1)
Eine Hein Genedale 7/B. 1911			100% of fair market value, up to any applicable statutory limit	

Debtor 1 Harry A. Dunn			Case number (if known)	20-11869
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
Personal clothing: shirts, pants, shoes, coats, jackets, sweaters,	\$2,000.00		\$2,000.00	Md. Code Ann., Cts. & Jud. Proc. § 11-504(f)(1)(i)(1)
underwear, sleepwear, shorts, etc Line from <i>Schedule A/B</i> : 11.1			100% of fair market value, up to any applicable statutory limit	
Watch, chain Line from Schedule A/B: 12.1	\$300.00		\$300.00	Md. Code Ann., Cts. & Jud. Proc. § 11-504(f)(1)(i)(1)
			100% of fair market value, up to any applicable statutory limit	c (XXXX)
Cash Line from Schedule A/B: 16.1	\$30.00		\$30.00	Md. Code Ann., Cts. & Jud. Proc. § 11-504(f)(1)(i)(1)
			100% of fair market value, up to any applicable statutory limit	
Checking: Bank of America Line from Schedule A/B: 17.1	\$700.00		\$390.00	Md. Code Ann., Cts. & Jud. Proc. § 11-504(f)(1)(i)(1)
Ellie lielii esileedale /v.Z. 1111			100% of fair market value, up to any applicable statutory limit	
Checking: Bank of America Line from Schedule A/B: 17.1	\$700.00		\$310.00	Md. Code Ann., Cts. & Jud. Proc. § 11-504(b)(5)
			100% of fair market value, up to any applicable statutory limit	
Checking: Bank of America Line from Schedule A/B: 17.2	\$20.00		\$20.00	Md. Code Ann., Cts. & Jud. Proc. § 11-504(f)(1)(i)(1)
Ellie liolii osilodale /v.Z. 1112			100% of fair market value, up to any applicable statutory limit	
Savings: Bank of America Line from Schedule A/B: 17.3	\$40.00		\$40.00	Md. Code Ann., Cts. & Jud. Proc. § 11-504(f)(1)(i)(1)
Ellie IIolii ochedale A.B. 1710			100% of fair market value, up to any applicable statutory limit	1100.3 11 00-(1)(1)(1)(1)
Savings: Andrews FCU	\$20.00		\$20.00	Md. Code Ann., Cts. & Jud. Proc. § 11-504(f)(1)(i)(1)
Ellie II olii oolilooda ovi 2. 1114			100% of fair market value, up to any applicable statutory limit	1100.3 11 00-(1)(1)(1)(1)
Thrift Saving: Federal Line from Schedule A/B: 21.1	\$45,000.00		100%	Md. Code Ann., Cts. & Jud. Proc. § 11-504(h)
			100% of fair market value, up to any applicable statutory limit	3.1.00.4.7
 Are you claiming a homestead exemption (Subject to adjustment on 4/01/22 and every No 			led on or after the date of adjustmer	nt.)
Yes. Did you acquire the property cover	red by the exemption wi	ithin 1	,215 days before you filed this case	?
□ No □ Yes				

Official Form 106C

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				· ·		
Fill in t	his informatio	n to identify you	ur case:			
Debtor	1 H	arry A. Dunn				
		rst Name	Middle Name Last Name			
Debtor	2					
(Spouse if	f, filing) Fi	rst Name	Middle Name Last Name			
United	States Bankrup	otcy Court for the	DISTRICT OF MARYLAND-GREENBELT I	DIVISION		
Case n	umber 20-1	1869				
(if known)		1005			☐ Check	if this is an
					 -	ded filing
Officia	al Form 10	nen				
		-	What Have Claims Casum	al leve Duran and		
Scne	eaule D:	Creditors	Who Have Claims Secure	a by Propert	<u>y </u>	12/15
is neede			If two married people are filing together, both are cout, number the entries, and attach it to this form.			
1. Do any	y creditors have	claims secured b	y your property?			
	No. Check this	box and submit t	his form to the court with your other schedules.	You have nothing else to	o report on this form.	
_		f the information	•	3		
			bolow.			
Part 1:		cured Claims		. Column A	Column B	Column C
			more than one secured claim, list the creditor separate s a particular claim, list the other creditors in Part 2. As	ly Amount of claim	Value of collateral	Unsecured
			ical order according to the creditor's name.	Do not deduct the	that supports this	portion
[a. Fi	reedom Mort	tgage		value of collateral.	claim	If any
C	orporation		Describe the property that secures the claim:	\$241,514.00	\$382,711.00	\$0.00
	editor's Name ttn: Bankrup	ntcv	2812 Kingswell Dr. Silver Spring, MD 20902 Montgomery County			
	07 Pleasant		Estimated arrears: \$44,000			
S	te 3		As of the date you file, the claim is: Check all that apply.			
M	It Laurel, NJ	08054	Contingent			
Nu	umber, Street, City,	State & Zip Code	Unliquidated			
Who ov	ves the debt? (Check one.	☐ Disputed Nature of lien. Check all that apply.			
Debt	or 1 only		An agreement you made (such as mortgage or s	ecured		
	or 2 only		car loan)	300.00		
_	or 1 and Debtor 2	2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At lea	ast one of the del	btors and another	☐ Judgment lien from a lawsuit			
	ck if this claim re nmunity debt	elates to a	Other (including a right to offset)			
		Opened				
		11/12 Last				
		Active	Last 4 digits of account number 8595			
Date de	bt was incurred	11/15/19	Last 4 digits of account number 8595			

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Debtor 1 Harry A. Dunn		Case number (if known) 20-11869				
First Name Middle Na	ame Last Name					
2.2 Montgomery County	Describe the property that secures the claim:	\$0.00	\$382,711.00	\$0.00		
Creditor's Name c/o Meyers, Rodbell & Rosenbaum, PA	2812 Kingswell Dr. Silver Spring, MD 20902 Montgomery County Estimated arrears: \$44,000					
6801 Kenilworth Avenue Suite 400 Riverdale, MD 20737-1385	As of the date you file, the claim is: Check all that apply. Contingent					
Number, Street, City, State & Zip Code Who owes the debt? Check one.	☐ Unliquidated ☐ Disputed Nature of lien. Check all that apply.					
■ Debtor 1 only □ Debtor 2 only	■ An agreement you made (such as mortgage or car loan)	secured				
□ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim relates to a community debt □ Check if this claim relates to a						
Date debt was incurred	Last 4 digits of account number					
If this is the last page of your form, add Write that number here:	olumn A on this page. Write that number here: the dollar value totals from all pages. r a Debt That You Already Listed	\$241,514. \$241,514.				
trying to collect from you for a debt you or	e notified about your bankruptcy for a debt that y we to someone else, list the creditor in Part 1, an you listed in Part 1, list the additional creditors h is page.	d then list the collection age	ncy here. Similarly, if you h	ave more		
Name, Number, Street, City, State & 2 McCabe, Weisberg & Conw. 312 Marshall Ave Ste 800 Laurel, MD 20707	ay LLC	which line in Part 1 did you ente 4 digits of account number				

Harry A. Dunn First Name First Name Bankruptcy Court for the: 20-11869 rm 106E/F	Middle Name Middle Name DISTRICT OF MARYLA	Last Name Last Name ND-GREENBELT DIVISIO			
First Name Bankruptcy Court for the: 20-11869 rm 106E/F	Middle Name	Last Name			
20-11869 rm 106E/F					
20-11869 rm 106E/F	DISTRICT OF MARYLA	ND-GREENBELT DIVISIO			
20-11869 rm 106E/F		NO ORELINDEET DIVIDIO	N		
rm 106E/F					
				_	ck if this is an
				amei	nded filing
E/F: Creditors W	ho Have Unsecu	red Claims			12/15
cutory Contracts and Unexpi ditors Who Have Claims Sect ontinuation Page to this pag- number (if known).	ired Leases (Official Form 1 ured by Property. If more sp e. If you have no informatio	06G). Do not include any cre ace is needed, copy the Part	ditors with partially s you need, fill it out, i	ecured claims tha number the entries	t are listed in s in the boxes on the
Part 2.	,				
type of claim it is. If a claim ha the claims in alphabetical orde re than one creditor holds a par	s both priority and nonpriority er according to the creditor's n rticular claim, list the other cre	amounts, list that claim here a ame. If you have more than tw ditors in Part 3.	nd show both priority a	nd nonpriority amou	unts. As much as
, , , , , , .		, , , , , , , , , , , , , , , , , , ,	Total claim	Priority	Nonpriority amount
el Dunn	Last 4 digits of	account number	\$0.00		
Creditor's Name					
	When was the	debt incurred?			
Street City State Zip Code	As of the date	ou file, the claim is: Check a	II that apply		
red the debt? Check one.	☐ Contingent				
4					
i only	☐ Unliquidated				
only 2 only	☐ Unliquidated☐ Disputed				
2 only	☐ Disputed	ITY unsecured claim:			
•	☐ Disputed Type of PRIOR				
2 only 1 and Debtor 2 only	Disputed Type of PRIOR Domestic su	ITY unsecured claim:	government		
2 only 1 and Debtor 2 only one of the debtors and anothe	Disputed Type of PRIOR Tope of Domestic su Taxes and co	ITY unsecured claim: pport obligations	0		
2 only 1 and Debtor 2 only one of the debtors and anothe if this claim is for a commun	Disputed Type of PRIOR Tope of Domestic su Taxes and co	ITY unsecured claim: pport obligations ertain other debts you owe the eath or personal injury while yo	0		
	cutory Contracts and Unexpiditors Who Have Claims Sectiontinuation Page to this page umber (if known). All of Your PRIORITY Unstituted in Part 2. Dur priority unsecured claims type of claim it is. If a claim has the claims in alphabetical ordere than one creditor holds a part anation of each type of claim, so anation of each type of claims type of	cutory Contracts and Unexpired Leases (Official Form 1 ditors Who Have Claims Secured by Property. If more spontinuation Page to this page. If you have no information umber (if known). All of Your PRIORITY Unsecured Claims ditors have priority unsecured claims against you? Part 2. Pur priority unsecured claims. If a creditor has more than on type of claim it is. If a claim has both priority and nonpriority the claims in alphabetical order according to the creditor's new than one creditor holds a particular claim, list the other creditation of each type of claim, see the instructions for this formation of each type of claim, see the instructions for this formation of each type of claim, see the instructions for this formation of each type of claim, see the instructions for this formation of each type of claim, see the instructions for this formation of each type of claim, see the instructions for this formation of each type of claim, see the instructions for this formation of each type of claim, see the instructions for this formation of each type of claim, see the instructions for this formation of each type of claim, see the instructions for this formation of each type of claim, see the instructions for this formation of each type of claim, see the instructions for this formation of each type of claim, see the instructions for this formation of each type of claim, see the instructions for this formation of each type of claim, see the instructions for this formation of each type of claim, see the instructions for this formation of each type of claim and the each type of claim against you?	cutory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors Who Have Claims Secured by Property. If more space is needed, copy the Part ontinuation Page to this page. If you have no information to report in a Part, do not fumber (if known). All of Your PRIORITY Unsecured Claims itors have priority unsecured claims against you? Part 2. Pur priority unsecured claims. If a creditor has more than one priority unsecured claim, list type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here a the claims in alphabetical order according to the creditor's name. If you have more than twee than one creditor holds a particular claim, list the other creditors in Part 3. anation of each type of claim, see the instructions for this form in the instruction booklet.) BI Dunn Creditor's Name Peartree Lane, Apt. 41 Spring, MD 20906 Street City State Zip Code Red the debt? Check one. Contingent Contingent	cutory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially sitions Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, rontinuation Page to this page. If you have no information to report in a Part, do not file that Part. On the toumber (if known). All of Your PRIORITY Unsecured Claims itors have priority unsecured claims against you? Part 2. Pur priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separatel type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority at the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims than one creditor holds a particular claim, list the other creditors in Part 3. anation of each type of claim, see the instructions for this form in the instruction booklet.) Total claim Peartree Lane, Apt. 41 Spring, MD 20906 Street City State Zip Code As of the date you file, the claim is: Check all that apply red the debt? Check one.	All of Your PRIORITY Unsecured Claims itors have priority unsecured claims against you? Part 2. Purt 2. Purt priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. From type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts and phabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Core than one creditor holds a particular claim, list the other creditors in Part 3. In anation of each type of claim, see the instructions for this form in the instruction booklet.) In anation of each type of claim, see the instructions for this form in the instruction booklet.) In anation of each type of claim, see the instructions for this form in the instruction booklet.) In anation of each type of claim, see the instructions for this form in the instruction booklet.) In anation of each type of claim, see the instructions for this form in the instruction booklet.) In anation of each type of claim, see the instructions for this form in the instruction booklet.) In anation of each type of claim, see the instructions for this form in the instruction booklet.) In anation of each type of claim, see the instructions for this form in the instruction booklet.) In anation of each type of claim, see the instructions for this form in the instruction booklet.) In anation of each type of claim, see the instructions for this form in the instruction booklet.) In anation of each type of claim, see the instructions for this form in the claim is: Check all that apply the claim is: Check all that apply the continuation of each type of claims, fill out the Core than one priority amounts, list that claim here and show both priority amounts, list the claim is the claim. From the claim is t

Total claim

Debto	r 1 Harry A. Dunn		Case number (if known)	20-11869	
4.1	Bank of America	Last 4 digits of account number	0965		\$0.00
	Nonpriority Creditor's Name 4909 Savarese Circle FI1-908-01-50 Tampa, FL 33634	When was the debt incurred?	Opened 11/06 Last 7/12/16	t Active	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	Debtor 1 only	☐ Contingent☐ Unliquidated			
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	■ Disputed			
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	that you did not		
	■ No	☐ Debts to pension or profit-sharir	ng plans, and other similar de	ebts	
	☐ Yes	Other. Specify Credit Care	d		
4.2	Capital One Nonpriority Creditor's Name	Last 4 digits of account number	1265		\$275.00
	Attn: Bankruptcy Po Box 30285	When was the debt incurred?	Opened 08/19 Last 1/20/20	t Active	
	Salt Lake City, UT 84130 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a separations	aration agreement or divorce		
	Is the claim subject to offset?	report as priority claims			
	No	Debts to pension or profit-sharing		ebts	
	Yes	Other. Specify Credit Care	<u> </u>		
4.3	Citibank/RadioShack	Last 4 digits of account number	5475		\$0.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 790034 St Louis, MO 63179	When was the debt incurred?	Opened 12/14/10 L 11/11/12	ast Active	
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply		
	Who incurred the debt? Check one.				
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	■ Disputed			
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce	that you did not	
	No	Debts to pension or profit-sharir	ng plans, and other similar de	ebts	
	□ Yes		= :		
	□ res	Other. Specify Charge Ac	Count		

Official Form 106 E/F

Debtor	1 Harry A. Dunn		Case number (if kno	wn) 20-11869					
4.4	Congressional Fcu Nonpriority Creditor's Name	Last 4 digits of account number	8086		\$0.00				
	Pob 23267 Washington, DC 20026	When was the debt incurred?	Opened 04/10 4/14/14	Last Active					
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	у					
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent ☐ Unliquidated							
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community	■ Disputed Type of NONPRIORITY unsecured □ Student loans							
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims							
	■ No	Debts to pension or profit-sharing	g plans, and other sin	nilar debts					
	Yes	Other. Specify Credit Card	l						
4.5	Congressional Fcu Nonpriority Creditor's Name	Last 4 digits of account number	0301		\$0.00				
	Pob 23267 Washington, DC 20026	When was the debt incurred?	Opened 4/07/ 4/14/14	10 Last Active					
•	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that appl	у					
	■ Debtor 1 only								
	Debtor 2 only	☐ Unliquidated							
	Debtor 1 and Debtor 2 only	□ Disputed							
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:						
	☐ Check if this claim is for a community	☐ Student loans	3 Student loans						
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or d	livorce that you did not					
	■ No	Debts to pension or profit-sharing	g plans, and other sin	nilar debts					
	Yes	Other. Specify Check Cred	dit Or Line Of Cr	edit					
4.6	Credit First National Association Nonpriority Creditor's Name	Last 4 digits of account number	3910		\$0.00				
	Attn: Bankruptcy Po Box 81315 Cleveland, OH 44181	When was the debt incurred?	Opened 08/11 8/19/13	Last Active					
	Number Street City State Zip Code	As of the date you file, the claim	s: Check all that appl	у					
	Who incurred the debt? Check one.			•					
	■ Debtor 1 only	☐ Contingent							
	Debtor 2 only	☐ Unliquidated or 2 only ☐ Disputed							
	Debtor 1 and Debtor 2 only								
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured							
	☐ Check if this claim is for a community	☐ Student loans							
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or d	livorce that you did not					
	■ No	Debts to pension or profit-sharing	g plans, and other sin	nilar debts					
	☐ Yes	■ Other. Specify Charge Acc							

Official Form 106 E/F

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Debtor 1	Harry A. I	Dunn		Case no	umber (if known)	20-11869				
	Credit One		Last 4 digits of account number	0614		_	\$386.00			
1	Po Box 988	ruptcy Department 73	When was the debt incurred?	Oper 1/12/	ned 08/19 Las /20	t Active				
ī		City State Zip Code the debt? Check one.	As of the date you file, the claim	is: Check	k all that apply					
1	■ Debtor 1 onl	lv	☐ Contingent							
	Debtor 2 onl	lv	☐ Unliquidated							
	Debtor 1 and	•	☐ Disputed							
	_	of the debtors and another	•	pe of NONPRIORITY unsecured claim:						
		s claim is for a community	☐ Student loans	☐ Student loans						
	debt	bject to offset?	☐ Obligations arising out of a separeport as priority claims	Obligations arising out of a separation agreement or divorce that you did not						
	■ No		Debts to pension or profit-sharir	ng plans	and other similar d	ebts				
	■ No □ Yes		Other. Specify Credit Card	•						
	Sprint		Last 4 digits of account number				\$784.00			
(Nonpriority Cred 6360 Sprint Overland Pa		When was the debt incurred?							
7	Number Street	City State Zip Code the debt? Check one.	As of the date you file, the claim	is: Check	k all that apply					
	■ Debtor 1 onl	V	☐ Contingent							
1	Debtor 2 onl	V	☐ Unliquidated							
	Debtor 1 and	•	☐ Disputed							
	_	of the debtors and another	Type of NONPRIORITY unsecure	d claim:						
		s claim is for a community	☐ Student loans							
•	debt	bject to offset?	Obligations arising out of a separeport as priority claims	aration ag	greement or divorce	that you did not				
1	■ No		\square Debts to pension or profit-sharing plans, and other similar debts							
I	☐ Yes		Other. Specify							
is trying	s page only if y g to collect fro	m you for a debt you owe to sor	t That You Already Listed out your bankruptcy, for a debt that y neone else, list the original creditor ir you listed in Parts 1 or 2, list the addi	Parts 1	or 2, then list the	collection agency	here. Similarly, if you			
notified	d for any debts	in Parts 1 or 2, do not fill out or	submit this page.	anomai oi	cuncio noto: ii yo	a ao not navo ada	nional porcono to bo			
	ne amounts of		secured Claim ns. This information is for statistical r	eporting	purposes only. 2	8 U.S.C. §159. Add	the amounts for each			
type of	unsecured cla	ıım.			Tota	l Claim				
Total claims	6a.	Domestic support obligations		6a.	\$	0.00				
from Part	t 1 6b.	Taxes and certain other debts	you owe the government	6b.	\$	0.00				
	6c.	Claims for death or personal in	ijury while you were intoxicated	6c.	\$	0.00				
	6d.	Other. Add all other priority unse	cured claims. Write that amount here.	6d.	\$	0.00				
	6e.	Total Priority. Add lines 6a thro	ugh 6d.	6e.	\$	0.00				
					Tota	l Claim				
	6f.	Student loans		6f.	\$	0.00				
Total claims										
from Part	t 2 6g.		paration agreement or divorce that	60	¢	0.00				
	6h.	you did not report as priority of Debts to pension or profit-sha	laims ring plans, and other similar debts	6g. 6h.	\$ 	0.00				
	6i.	•	Insecured claims. Write that amount	6i.	\$	0.00				

Official Form 106 E/F

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Debtor 1	Harry A.	Dunn	Case nu	mber (if known)	20-11869		
		here.			1,445.00		
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$	1,445.00		

Fill in this inform	nation to identify your				
Debtor 1	Harry A. Dunn				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bar	nkruptcy Court for the:	DISTRICT OF MARYLAND-GREENBELT DIVISION			
Case number 2	20-11869				
(if known)					Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

ı	Person or	company with Name, Number	whom you have th r, Street, City, State and ZIF	e contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.2					<u></u>
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	_
2.3	Oity		Otate	Zii Oodc	
	Name				
	Number	Street			_
	City		State	ZIP Code	
2.4					
	Name				
	Number	Street			_
	City		State	ZIP Code	_
2.5	Oity		State	211 0000	
	Name				_
	Number	Street			
	City		State	ZIP Code	<u> </u>

Official Form 106G

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					-
Fill in this i	information to identify your	case:			
Debtor 1	Harry A. Dunn				
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing	g) First Name	Middle Name	Last Name		
United State	es Bankruptcy Court for the:	DISTRICT OF MARYLA	AND-GREENBELT DIVI	SION	
Case numb	er 20-11869				
(if known)					☐ Check if this is an
					amended filing
Ott: -: -1	Tarres 40011				
	Form 106H	- <u>-</u> .			
Sched	ule H: Your Cod	lebtors			12/15
your name a	and case number (if known ou have any codebtors? (If). Answer every question	i.		op of any Additional Pages, write
_					
■ No					
☐ Yes					
	in the last 8 years, have yo a, California, Idaho, Louisiana				ty states and territories include)
■ No. /	Go to line 3.				
	Did your spouse, former spo	uso or logal aquivalent live	o with you at the time?		
□ 163.	Dia your spouse, former spo	use, or legal equivalent live	e with you at the time:		
in line Form 1 out Co	2 again as a codebtor only	if that person is a guaran I Form 106E/F), or Sched	tor or cosigner. Make	sure you have listed 06G). Use Schedule D	ng with you. List the person shown the creditor on Schedule D (Official, Schedule E/F, or Schedule G to fill reditor to whom you owe the debt les that apply:
				_	
3.1	lame			Schedule D, li	
1	idille			☐ Schedule E/F,	
				☐ Schedule G, li	ne
	lumber Street City	State	ZIP Code		
3.2				Schedule D, lii	ne
٨	lame			☐ Schedule E/F,	
				☐ Schedule G, li	ne
	lumber Street				
C	City	State	ZIP Code		

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Fill	in this information to identify your ca	ase:								
Del	otor 1 Harry A. Dur	nn								
	otor 2 puse, if filing)				_					
Uni	ted States Bankruptcy Court for the	: DISTRICT OF MARY	LAND-GREENBELT D	IVISION	1_					
1	ze number 20-11869		-				eck if this is	ed filing	vina naotnatiti	on obontor
_	W : 15 4001					, ப			wing postpetiti e following da	
<u>U</u>	fficial Form 106I						MM / DD/ `	YYYY		
S	chedule I: Your Inc	ome								12/15
spo atta	plying correct information. If you use. If you are separated and you ch a separate sheet to this form. Describe Employment	r spouse is not filing wi	ith you, do not includ	le inforr	nati	on abo	ut your sp	ouse. If	more space	is needed,
1.	Fill in your employment information.	Debtor 1			Debtor 2 or non-filing spouse					
	If you have more than one job,	Employment status	■ Employed				☐ Empl	oyed		
	attach a separate page with information about additional	Employment status	☐ Not employed				☐ Not €	employe	d	
	employers.	Occupation	Police Officer							
	Include part-time, seasonal, or self-employed work.	Employer's name	U.S. Capitol Poli	се						
	Occupation may include student or homemaker, if it applies.	Employer's address	USDA National F DPRS Billing Un PO Box 61760 New Orleans, LA	it		enter				
		How long employed to	here? 12 years	3						
Pa	Give Details About Mor	nthly Income								
	mate monthly income as of the dause unless you are separated.	ate you file this form. If	you have nothing to re	port for	any	line, wr	ite \$0 in the	space.	Include your i	non-filing
	u or your non-filing spouse have mo e space, attach a separate sheet to		ombine the information	for all e	mp	oyers fo	or that perso	on on th	e lines below.	If you need
						For D	ebtor 1		Debtor 2 or -filing spouse	
2.	List monthly gross wages, saladeductions). If not paid monthly, or			2.	\$		8,493.69	\$	N/	A
3.	Estimate and list monthly overti	ime pay.		3.	+\$		0.00	+\$	N/	<u>A</u>
4.	Calculate gross Income. Add lin	ne 2 + line 3.		4.	\$	8,	493.69	\$	N/A	

Official Form 106I Schedule I: Your Income page 1

Deb	tor 1	Harry A. Dunn	-	Ca	ase number (<i>if k</i>	nown)	20-118	369		
				F	For Debtor 1			ebtor :	2 or pouse	
	Сор	y line 4 here	4.	\$	8,49	3.69	\$		N/A	_
5.	List	all payroll deductions:								
٥.	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	2,10	R 10	\$		N/A	
	5b.	Mandatory contributions for retirement plans	5b.			4.34	\$		N/A	_
	5c.	Voluntary contributions for retirement plans	5c.			0.00	\$		N/A	_
	5d.	Required repayments of retirement fund loans	5d.	\$		0.00	\$		N/A	_
	5e.	Insurance	5e.	\$	52	5.42	\$		N/A	_
	5f.	Domestic support obligations	5f.	\$		8.00	\$		N/A	_
	5g.	Union dues	5g.			3.33			N/A	_
	5h.	Other deductions. Specify: TSP Loan Repay (ends in 23 months)	5h.	+ \$ 9		1.50	+ \$		N/A	_
		TSP Loan Repay2 (ends May 2020)	_	,		8.37	· —		N/A	_
6.		the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$			\$		N/A	_
7.	Cald	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	5,32	4.63	\$		N/A	<u>. </u>
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total	90	\$		0.00	¢		NI/A	
	8b.	monthly net income. Interest and dividends	8a. 8b.			0.00	\$		N/A N/A	_
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.				0.00	\$		N/A	_
	8d.	Unemployment compensation	8d.	\$		0.00	\$		N/A	_
	8e.	Social Security	8e.	\$	6	0.00	\$		N/A	_
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	8f.	\$		0.00	\$		N/A	_
	8g.	Pension or retirement income	8g.			0.00	\$		N/A	_
	8h.	Other monthly income. Specify: Prorated tax refund	8h.	+ \$	62	3.00	+ \$		N/A	· <u> </u>
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	623	3.00	\$		N/	A
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.		5,947.63	+ \$		N/A	= \$ _	5,947.63
11.	Inclu othe	te all other regular contributions to the expenses that you list in Schedule adde contributions from an unmarried partner, members of your household, your friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not cify:	deper				•	hedule 11.		0.00
12.		I the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certailes						12.	\$	5,947.63
13.	Do y	you expect an increase or decrease within the year after you file this form No.	?							ly income
	_	Yes. Explain: Debtor's overtime is sporadic								

Official Form 106l Schedule I: Your Income page 2

Fill	in this informa	ition to identify yo	our case:					
Deb	tor 1	Harry A. Dun	ın				k if this is: An amended filing	
	tor 2						A supplement show	wing postpetition chapter
(Spo	ouse, if filing)						13 expenses as of	the following date:
Unit	ed States Bankr	ruptcy Court for the	DISTRI	CT OF MARYLAND-GREEDN	ENBELT	-	MM / DD / YYYY	
1	e number 20 nown)	D-11869						
		rm 106J						
		J: Your I						12/15
info	ormation. If m		eded, atta y questio	If two married people ar ch another sheet to this n.				
1.	Is this a joir		iloiu					
	■ No. Go to	o line 2. es Debtor 2 live i	n a separ	ate household?				
	□ N □ Y	-	st file Offici	al Form 106J-2, <i>Expenses</i>	for Separate House	<i>hold</i> of Debt	tor 2.	
2.	Do you have	e dependents?	□ No					
	Do not list D Debtor 2.		Yes.	Fill out this information for each dependent	Dependent's relation		Dependent's age	Does dependent live with you?
	Do not state dependents				Daughter		8	□ No ■ Yes □ No □ Yes □ No □ Yes □ No □ Yes □ No
3.	expenses o	oenses include f people other tl d your depende	han $_{oldsymbol{\sqcap}}$	No Yes				☐ Yes
exp	imate your ex		our bankr	y Expenses uptcy filing date unless y y is filed. If this is a supp				
the		h assistance and		government assistance i luded it on <i>Schedule I:</i>)			Your exp	enses
4.		or home owners		ses for your residence. I r lot.	nclude first mortgage	4. \$		1,850.00
	If not includ	led in line 4:						
	4a. Real e	estate taxes				4a. \$		0.00
		rty, homeowner's	s, or renter	's insurance		4b. \$		0.00
				ipkeep expenses		4c. \$		150.00
_		owner's associat			ma aquitu la ara	4d. \$		0.00
5.	Auditional r	nortgage payme	ants for yo	our residence, such as ho	me equity loans	5. \$		0.00

ebtor 1 Harr	y A. Dunn	Case number (i	f known) 20-11869
Utilities:			
6a. Elect	ricity, heat, natural gas	6a. \$	250.00
6b. Wate	r, sewer, garbage collection	6b. \$ ⁻	60.00
6c. Telep	hone, cell phone, Internet, satellite, and cable services	6c. \$ ⁻	0.00
6d. Other	: Specify: Cellphone	6d. \$	100.00
	e/internet/Phone	\$	200.00
	ousekeeping supplies	7. \$	600.00
	and children's education costs	8. \$	0.00
	nundry, and dry cleaning	9. \$	200.00
	are products and services	10. \$	150.00
	d dental expenses	11. \$	60.00
	tion. Include gas, maintenance, bus or train fare.	π. Ψ	00.00
	de car payments.	12. \$	250.00
	ent, clubs, recreation, newspapers, magazines, and books	13. \$	100.00
	contributions and religious donations	14. \$	50.00
. Insurance.		• -	
	de insurance deducted from your pay or included in lines 4 or 20.		
15a. Life ir	nsurance	15a. \$	0.00
15b. Healt	h insurance	15b. \$	0.00
15c. Vehic	le insurance	15c. \$ ⁻	125.00
15d. Other	insurance. Specify:	15d. \$	0.00
	not include taxes deducted from your pay or included in lines 4 or 20.		
Specify:	, , , , , , , , , , , , , , , , , , ,	16. \$	0.00
Installment	or lease payments:		
17a. Car p	ayments for Vehicle 1	17a. \$	360.00
17b. Car p	ayments for Vehicle 2	17b. \$	0.00
17c. Other	. Specify:	17c. \$	0.00
17d. Other		17d. \$	0.00
	ents of alimony, maintenance, and support that you did not report	as	
deducted f	rom your pay on line 5, Schedule I, Your Income (Official Form 106	SI). 18. \$	0.00
. Other payn	nents you make to support others who do not live with you.	\$	0.00
Specify:		19.	
	property expenses not included in lines 4 or 5 of this form or on S		ncome.
20a. Morto	ages on other property	20a. \$	0.00
20b. Real	estate taxes	20b. \$	0.00
20c. Prope	erty, homeowner's, or renter's insurance	20c. \$	0.00
20d. Maint	enance, repair, and upkeep expenses	20d. \$	0.00
20e. Home	eowner's association or condominium dues	20e. \$	0.00
. Other: Spe	cify: Gym fee	21. +\$	30.00
Pet		+\$	150.00
1 01			130.00
. Calculate y	our monthly expenses		
	es 4 through 21.	\$	4,685.00
22b. Copy I	ne 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-	-2 \$	
22c. Add lin	e 22a and 22b. The result is your monthly expenses.	\$	4,685.00
-	our monthly net income.	65 6	
	line 12 (your combined monthly income) from Schedule I.	23a. \$	5,947.63
23b. Copy	your monthly expenses from line 22c above.	23b\$ ₋	4,685.00
00 0 :			
	act your monthly expenses from your monthly income.	23c. \$	1,262.63
The r	esult is your monthly net income.	23c. \$	1,202.00
Do vou evr	ect an increase or decrease in your expenses within the year afte	r vou file this for	m?
	do you expect to finish paying for your car loan within the year or do you expect		
For example		,	
	o the terms of your mortgage?		
	o the terms of your mortgage?		

Debtor 1 Harry A. Dunn First Name Middle Name Last Name Debtor 2 (Spouse if, Illing) First Name Middle Name Last Name United States Bankruptcy Court for the: DISTRICT OF MARYLAND-GREENBELT DIVISION Case number 20-11869 (If Morem) Offficial Form 106Dec Declaration About an Individual Debtor's Schedules 12/15 If two married people are filling together, both are equally responsible for supplying correct information. You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §\$ 152, 1341, 1519, and 3571. Sign Below Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? No Yes. Name of person Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119) Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct. X /s/ Harry A. Dunn Signature of Debtor 1 Date February 12, 2020 Date	Fill in this	s information to identify your	case:			
Debtor 2 (Spouse f, filling) First Name Midde Name Last Name	Debtor 1	Harry A. Dunn				
United States Bankruptcy Court for the: DISTRICT OF MARYLAND-GREENBELT DIVISION Case number 20-11869 (if known) Official Form 106Dec Declaration About an Individual Debtor's Schedules If two married people are filing together, both are equally responsible for supplying correct information. You must flie this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Sign Below Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? No Yes. Name of person Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119) Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct. X /s/s Harry A. Dunn Signature of Debtor 1		First Name	Middle Name	Last Name		
United States Bankruptcy Court for the: DISTRICT OF MARYLAND-GREENBELT DIVISION Case number		East Name	NAC-della Nia-sa-	Last Name		
Case number 20-11869 Check if this is an amended filing Official Form 106Dec Declaration About an Individual Debtor's Schedules If two married people are filing together, both are equally responsible for supplying correct information. You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Sign Below Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? No Yes. Name of person Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119) Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct. X / /s/ Harry A. Dunn X Signature of Debtor 1	(Spouse if, fill	ing) First Name	Middle Name	Last Name		
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Harry A. Dunn Signature of Debtor 2 Signature of Debtor 1			that I have read the su	mmary and schedules fil	ed with this declarat	ion and
Harry A. Dunn Signature of Debtor 2 Signature of Debtor 1	X /9	s/ Harry A. Dunn		X		
Signature of Debtor 1		•			f Debtor 2	
Date February 12, 2020 Date				-		
	D	Date February 12, 2020		Date		